

FQPA SF is not included in cRfD

FQPA SF was retained by OPP but not incorporated into the cPAD perhaps because the composite UF would be 10,000?

FQPA SF not included in cRfD.

OPP doc does not summarize toxicity data and does not overtly state the RfD, rather the cPAD and FQPA SF are provided

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On HHBM webpage: is RfD actually cPAD?



An explicit RFC is not provided, HEC and UF are provided.
Should CSFs be archived when the OPP classification is "Not Likely"?
The OPP cRfD is based on an interim study report
OPP cRfD > OPP aRfD
aRfD lower than cRfD. Acute is based on developmental endpoint.
“Due to the rapid recovery of ChE activity, the acute exposure from carbaryl is the main duration of concern and therefore a chronic assessment is not appropriate for carbaryl.”

Cited for OPP assessment
aRfD used for cRfD. FQPA SF not included in cRfD.
OPP preliminary risk assessment cited.
Should CSFs be archived when the OPP classification is "Not Likely"?
aRfD is equivalent to cRfD
aRfD for females 13+ is <cRfD (0.02) based on dev tox.
aRfD=cRfD
An OPP inhalation assessment was done for workers but a RfC is not clearly stated.



aRfD=cRfD: justification was chronic liver effect was adaptive and not adverse, rapid metabolism
OPP cRfD > OPP aRfD
The OPP-provided document is an addendum to health assessment and states conclusions. Is this adequate?
OPP cRfD > OPP aRfD
OPP cRfD > OPP aRfD, assessment is noted as draft
An addendum to an iRED is provided by OPP and this document notes how values have been changed from the previous assessment. Is this adequate?

Preliminary scoping document provided.	
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